PTO/SB/17 (10-07)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Complete it Rnown Comp	Under the Paperwork Reduction A	respond to a collection of information unless it displays a valid OMB control number.							
FEE TRANSMITTAL For FY 2008 Applicant claims small entity status. See 37 CFR 1.27 Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 460.00 Attorney Docket No. O365-0609PUS1 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Check Credit Card Money Order X Deposit Account Deposit Account, Namber: O2-2448 Deposit Account Deposit Account Name: D02-2448 Deposit Account Name: D0365-0609PUS1 METHOD OF PAYMENT (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below For the above-identified deposit account, the Director is hereby authorized to (check all that apply) X Charge fee(s) indicated below For the above-identified deposit account, the Director is hereby authorized to (check all that apply) X Charge fee(s) indicated below For the above-identified deposit account, the Director is hereby authorized to (check all that apply) X Charge fee(s) indicated below For the above-identified deposit account, the Director is hereby authorized to (check all that apply) X Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee X Credit any overpayments FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES Small Entity Application Type Fee (S)		Complete if Known							
First Named Inventor	l '								
Applicant claims small entity status. See 37 CFR 1.27	FEE IRAN								
Application Type	For FY 2008								
METHOD OF PAYMENT (check all that apply)									
METHOD OF PAYMENT (check all that apply)	Applicant claims small entity status. See 37 CFR 1.27			Art Unit					
Check Credit Card Money Order Obter (please identify): X Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP	TOTAL AMOUNT OF PAYMENT (\$) 460.00			Attorney Docket	0365-0609PU	S1			
Note Deposit Account Number Q2-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP	METHOD OF PAYMENT (ch	eck all that apply)							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee	Check Credit Card Money Order None Other (please identify):								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee	x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 X Credit any overpayments Credit X Credit any overpayments Credit X Credit any overpayments Credit X Credit	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Fee(s) under 37 CFR 1.16 and 1.17	X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Telephone Tele	X Charge any additional fee(s) or underpayments of gee(s) under 37 CFR 1.16 and 1.17								
SEARCH FEES SEARCH FEES SMAIL Entity Fee (\$) F									
Papellication Type									
Part	ļ	FILING FEES	SE	ARCH FEES	EXAMI	NATION FEES			
Utility	Application Type Fe		Foo (\$		Foo (\$)		Foos	Paid (\$)	
Design 210 105 100 50 130 65							: 003	1 ata (ψ)	
Plant									
Reissue	i -								
Provisional 210 105 0 0 0 0 0								····	
2. EXCESS CLAIM FEES Fee Obscription Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) F									
Fee Sec Fee Sec Fee Sec Fee Sec Fee Sec Fee Sec		.10 105	U	· ·	U	Ū		Small Entity	
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof (round up to a whole number) x Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Anon-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1252 Extension for response within second month Registration No. (Attorney/Agent) 29,680 Telephone (703) 205-8000	Eng (\$) Fee (\$)								
Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)								25	
Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims	l ' ' ' '						210	105	
HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) -100 = /50 = (round up to a whole number) x = 4. OTHER FEE(\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1252 Extension for response within second month 460.00								185	
HP = highest number of total claims paid for, if greater than 20. Indep. Claims	Total Claims Extra Claim	s Fee (\$)	Fee I	e Paid (\$) <u>Mt</u>		lultiple Dependent Claims			
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): SUBMITTED BY Signature Registration No. (Attorney/Agent) Registration No. (Attorney/Agent) Picker Paid (\$) Registration No. (Attorney/Agent) Picker Paid (\$) Telephone Telephone Telephone Total Sheets Fee Paid (\$) Fees Paid (\$) Fees Paid (\$) Telephone Telephone Telephone Total Sheets Telephone Telep	. =	_ x = _			<u>F</u>	ee (\$)	Fee Paid (<u>\$)</u>	
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Cround up to a whole number) x Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1252 Extension for response within second month 460.00 SUBMITTED BY Signature Registration No. (Attorney/Agent) 29,680 Telephone (703) 205-8000	HP = highest number of total claims pa	id for, if greater than 20.					· · · · · · · · · · · · · · · · · · ·	····	
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets	Indep. Claims Extra Claim		Fee I	Paid (\$)					
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets	HP = highest number of independent claims paid for, if greater than 3.								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) -100 = /50 = (round up to a whole number) x = -100 = /50 =	If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50								
- 100 = /50 = (round up to a whole number) x = 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1252 Extension for response within second month 460.00 SUBMITTED BY Signature Registration No. (Attorney/Agent) 29,680 Telephone (703) 205-8000					tion there	of Fee (\$)	Fee	Paid (\$)	
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1252 Extension for response within second month 460.00 SUBMITTED BY Signature Registration No. (Attorney/Agent) 29,680 Telephone (703) 205-8000									
Other (e.g., late filing surcharge): 1252 Extension for response within second month 460.00 SUBMITTED BY Signature Registration No. (Attorney/Agent) 29,680 Telephone (703) 205-8000									
SUBMITTED BY Signature Registration No. (Attorney/Agent) 29,680 Telephone (703) 205-8000									
Signature Registration No. (Attorney/Agent) 29,680 Telephone (703) 205-8000	Other (e.g., late filing surchar	ge): 1252 Extension	n for re	sponse within se	econd mo	onth	4	60.00	
Signature Cauch #46,607 Registration No. (Attorney/Agent) 29,680 Telephone (703) 205-8000 Name (Print/Type) Michael M Mutter Date September 22, 2008	SUBMITTED BY								
Name (Print/Type) Michael Mutter Date September 22, 2008	Signature Caucle #46,607 Registration No. (Attorney/Agent) 29,680						Telephone (703) 205-8000		
	Name (Print/Type) Michael K Mutter						eptembe	r 22, 2008	